

## Maharshi Sandipani Rashtriya Vedavidya Pratishthan

(Ministry of Human Resource Development, Govt. of India) Vedavidya Marg, Chintaman Ganesh, Ujjain - 456006 (M.P.)

- 1. In case of Selection for grant, it is mandatory to admit/register students for Veda-Bhushan of MSRVVP.
- 2. Sent hard copy with all enclosures to Secretary, MSRVVP, Ujjain and Soft copy of PDF to email newgrantmsrvvp@gmail.com

## Application (New) for Seeking Financial Assistance under the scheme to the Voluntary Organizations for dissemination of Vedas through Pathashalas Year 2019-20

1.	Name of the Voluntary Organization	:	
	Complete Address for communication	:	
	With Pin Code		
	Nearest Railway Station	:	
	Telephone and Mobile No.	:	
	Email Address	:	
	User I.D. No.	:	
	Recognition of Dist. Education Department (Yes/No.)	:	
	Darpan Portal Unique I.D. No.	:	
2.	Year of Establishment	:	
3.	Date of Registration, if registered.	:	
	(Attach copy of certificate of registration.)		
4.	Management Body Committee (If yes)?	:	
	Name and Designation	:	
	(i) Chairman	:	
	(ii) Secretary	:	
	(iii) Treasurer	:	
	(iv) Attach someone else	:	
6.	Examining Body to which the institute is presently affiliated.	:	
7.	Veda course under which students studying.	:	
8.	Number of students in each class in previous	:	
	academic session.		
9.	During current academic session, number of registered students in each class	:	

10.	Nur	nber of students living in Pathashala under	:	
	Volu	untary Organization		
	(a)	Previous Year	:	
	(b)	Current Academic Year	:	
11.	Whe	ether Land and Building are owned?	:	
	(1)	Pathshala/Trust Ownership	:	
	(2)	10/25/55 years of lease	:	
	(3)	With year rental agreement	:	
12.	Exp	enses in following heads during last three years.	:	
	1.	Salary to Teachers	:	·
	2.	Salary to Establishment Staff	:	
	3.	Hostel / Students Maintenance	:	
	4.	Scholarship	:	
	5.	Miscellaneous and Contingent Expenses	:	
13.	Fina	uncial Assistance obtained from various	:	
		ces during last three years e.g. State Govt.,		
		al Body, Trust, Govt. of India, MSRVVP etc.		
14.	If a	acquired assets from Govt. of India or	:	
	MSI	RVVP, furnish details.		
15.	Proc	duce each copy of the following documents	:	
	1.	Annual Report of activities of previous	:	
		Three year of the institute.		
	2.	Audited Accounts of institute for previous	:	
		year. which should include the following:		
		1. Income and Expenditure	:	
		2. Receipts and Payments	:	
		3. Balance Sheet	:	·
		4. Utilisation Certificate	:	

16.	Whe	ther under this scho	eme, in previ	ous three	:				
	year	s grants-in-aid receive	ed from Govt.	of India/					
	Prati	ishthan, audited ac	ecounts or i	utilization					
	certi	ficate submitted ?							
17.	Deta	ils of Grant for Salary	/ Education :		:				
	No.	of Teachers in each ca	tegory, existin	ıg					
	remi	uneration							
C	lass of	f Teacher / Subject	Fulltime	No.	Remuneration	Monthly Emolument			
		1.	2.	3.	4.	5.			
18.	Whether existing application for financial :								
	assis	tance for salary a	nd scholarsh						
	addi	tion to the State Go	ovt. /Any otl						
	sour	ces?							
19.	If ye	s, please indicate		:					
	(a)	State Govt. /Any o	other Govt. so	ources by	:				
		which receiving gra							
		and scholarship (N	Mention Rate,	Amount					
		and Duration), and							
	(b)	Details of those Ved	a Teachers an	:					
		of students who are	not getting pa	ayment of					
		salary and scholars	ship by State	Govt. /					
		Any other Govt. gra	nt.						

20.	(a)	Det	Details of receipt of grant in previous three :							
		yea	years under following heads from Central							
		Gov	vernment /Prat	ishthan						
Honorarium Scholarships Library Students maintenance Equipments N								Miscelleous		
	1.		2.	3.	4.		5.	6.		
	(b)	Det	ails of grant re	ceived so fa	r from Govt.	:				
	( )		India/Pratishth							
			lding to establis							
21.	Nam		Bank with Bran			:				
			Number			:				
			ting grant Bank	's IFSC Code	e / RTGS	:				
22.			ount received f							
			n FCRA No.	roin roicigit	origin 15 \$\psi\$	•				
	COD	, tric.	III CNA NO.							
						Signatu	re of Head of	the Institution		
/Secretary / Principal with Office Seal								rith Office Seal		
Date										
	Place:									
INOU	Note :- It is compulsory to all the columns in the application form.									

## Particulars of Veda Pathashala under Voluntary Organization

1.	Name of Veda Pathashala / Vidyalaya	
	• •	
2.	Address with Pin Code	
	(Telephone & Mobile No.)	
3.	Date of Establishment	
4.	Whether Veda Pathashala / Vidyalaya is	
	registered ? If yes, when and registered by	
	whom. (Attach copy)	
5.	Name of Society or Trust which runs	
	Pathashala and its registration No. with date	
	(Attach copy)	
6.	Source of Income of Society or Trust	
7.	Particulars of building and other assets	
	ownred or possessed or has right by the Trust.	
8.	Vedas and Shakhas being taught.	
9.	Particulars of Course and its duration	
10.	Level of method of teaching	
11.	Time of Vedas Teaching (Attach Time Table)	
12.	Number of fulltime Students	
13.	Number of fulltime Teachers	
14.	Number of part-time Teachers	
15.	Status of teaching of other subjects	
16.	Particulars of other employees	
17.	Any other information, which is necessary.	
Date	2:	Name and Signature of Manager
Plac	e:	

		Particulars of Veda T	'eacher	
1.	Name			Paste a recent
2.	Father's Name			passport size
3.	Date of Birth			photograph of
4.	Aadhaar No.			Veda Teacher
5.	Address a) Perman	nent Address		
	b) Curren	t Address		
	(Includ	ing Mo. No.)		
6.	Veda and Shakha			
7.	Whether Veda Guru	ı is Samhita Pathi/		
	Kramant Pathi/Ghana	nt Pathi. Tick mark (✓)		
	whichever is applicable	ę.		
8.	Name of Guru of Veda	Teacher		
9.	Particulars of teaching	g experience of veda		
	teacher			
10.	Name of Institution	/ Pathashala where		
	serving with designation	on		
11.	Date of employment			
12.	Salary/Emoluments be	eing received presently.		
13.	In addition of Vedas	, particulars of other		
	academic qualification	3		
14.	Source of salary (Gove	rnment and others)		
		Name	with Signature of Vo	eda Teacher
Date	:			
Place	:			

**Instructions:** It is compulsory to fill all the columns in the application form.

## Particulars of Other Subjects Teacher (Performa for Sanskrit Language and Modern Subjects teachers)

1.	Na	me									Pas	te a recent	
2.	Father/Husband's Name								]	passpo	ort size photo		
3.	Date of Birth										of S	Sanskrit &	
4.		dhaar N									Mod	lern Subject	
4.	Aa	unaan i	10.									Гeacher	
											=	rederies	
5.	Ad	dress	a)	Р	ermane	nt					-		
			b)	P	resent						-		
				7)	with	Mo.					-		
				N	Jo.)								
6.	Par	ticulars	of Acad	den	nic Qual	ificatio	n						
S.	I	Examir	ation	D	egree	Speci	ialization	Year	Class	Mar	ks/	Board	
No					O	•				Divis	sion	University	
I.													
II.													
III													
IV													
V.													
VI													
7.	7. Name of teachers who received academic ————————————————————————————————————												
		Subjec	t		Degre	e D	iploma	Certific	ation				
Scie	nce												
Socia	al Sc	ience											
Matl	nem	atics											
Com	put	er Appl	ications	,									
Sans	krit												
Yoga	a												

8.	Name of last Academic Institution attended/								
	qualification acquired								
9.	Details of Teaching Experience								
10.	As a Teacher, number of students being taught								
	(a) Present Designation								
	(b) Name of Institution/Pathashala, where serving								
11.	Date of employment								
12.	As a fulltime Teacher, how many hours teaching to								
	students?								
13.	Honorarium and other Allowances as on date								
14.	Any other Source of Honorarium (Government and								
	others)								
	Name with Signature of Teacher (other than Veda)								
Date									
	Signature of Office Bearer of Institution /								
	Pathashala with Seal								
<b>N.T.</b>									

**Note**: Please specify name of the existing post held in column No. 10. In addition to modern subject's designation, also mention those subjects which are being taught by him/her (e.g. Mathematics, English, Science or Social Science etc.).

Date of Advt. 1.3.2019

Last date 31.3.2019